L13000015955

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
_		
Res	ms.	

Office Use Only



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SLUKCIANS OF STATE
SLUKINASSEE FLORIDA

T. Burch DEC 4 2012

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: Nile River LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Roberto Gonzalez

(Contact Person)

TaxSmart Accounting Services LLC

(Firm/Company)

6653 Powers Ave Ste 241

(Address)

Jacksonville, FL 32217

(City/State and Zip Code)

For further information concerning this matter, please call:

Roberto Gonzalez	<u>'</u>
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m at}}$, 904 $_{\odot}$ 733-0027

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the lin of State is: Nile	nited liability company as it app	ears on the records of the F	lorida Depa	artmei	nt -·
2. This limited liabili Florida	y company was organized under	r the laws of:	TALLAHASSEE	13 DEC -2	
3. The Florida docum L1300001595	ent/registration number of this li	imited liability company is	ELORIDA ELORIDA	PH 12: 25	
	e of Person Resigning) ity company and affirm the limit		(Print Title) een notified	d of m	- У
Signature of Resign	ing Member, Managing Membe	r or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				